REC'D

AUG 2 6 2010 APCO

Initial Notification of Applicability^b

National Emission Standards for Hazardous Air Pollutants: Stationary Reciprocating Internal Combustion Engines 40 CFR Part 63 Subpart ZZZZ

X Yes, I am subject to 40 CFR Part 63 subpart ZZZZ National Emission Standards for
Hazardous Air Pollutants for Stationary Reciprocating Internal Combustion Engines
NAICS code(s):
Compliance Date: 🗵 Existing source: May 3, 2013 🔲 New/reconstructed source: upon initial startup
Note: The May 3, 2013 compliance date for existing sources applies to the following engine types:
 Existing non-emergency CI stationary RICE with a site rating of more than 500 brake HP located at a major source of HAP emissions
 Existing stationary CI RICE with a site rating of less than or equal to 500 brake HP located at a major source of HAP emissions
Existing stationary CI RICE located at an area source of HAP emissions
Company name: Nebraska City Utilities, City of Nebraska City, NE
Facility name (if different): Nebraska City Power Plant #1
Facility (physical location) address: 404 North 1st Street Nebraska City, NE 68410
My facility is a (please choose one): Major source Synthetic minor

^a This is an example of the type of information that must be submitted to fulfill the Initial Notification of Applicability Status requirement of 40 CFR 63, subpart ZZZZ. You may submit the information in another form or format, or you may use this form.

b Initial Notification is due 120 days after the effective date of the rule or 120 days after you become subject to the rule

Example^a

Owner name/title: City of Nebraska City, Jack Hobbie,	Mayor
c/o Leroy Frana, General Manager	
Nebraska City Utilities, P.O.	Box 670
Owner/company address: Nebraska City, NE 68410-0670	
Owner telephone number: (402) 873-3353 Ext. 627	
CWITCH COOPTIONS THAT ISSUE	
Owner email address (if available)ebraskacityutiliti	es.com
Owner email address (if available).	
If the Operator information is different from the Owner, please p	provide the followina:
if the Operator information is different from the Owner, places p	notice the renetiming.
Operator name/title: Ken Maybee	
Operator telephone number:(402) 873-3353 Ext.	. 654
Operator email address (if available):	
Operator email address (ii available).	
I hereby certify that the information presented herein is correct	to the best of my knowledge.
Thereby Certify that the information processes no our to	, ,
$\langle \lambda \downarrow 1 \rangle 0 \rangle$	08/24/10
(Sign August	(Date)
(Sign ature)	(Bato)
Jack Hobbie, Mayor	
	(402) 873-3353 (Talanhana Na.)
(Name/title)	(Telephone No.)